Combined Declaration For Patent Application and Power of Attorney							ATTOR 83262N	NEY DOCK	(ET
As below named inven My residence, post office address I believe I am the original, first an of the subject matter which is claim	and citizenship a d sole inventor (	are as stated be if only one na	me is listed b	elow) or an original, fi	rst and joint inv	ventor (i	if plural name	s are listed b	elow)
METHOD AND A				ING DISCRET INKJET PRI		AOT	umes f	OR	
The specification of which (check	only one item b	elow):							
X is attached hereto.				-					
was filed as United State was amended on (if appl		erial No. on	and						
was filed as PCT internat	•	n Number o	n and was a	amended under PCT	Article 19 on	(if appl	licable).		
I hereby state that I have reviewed	and understand	the contents o	f the above-i	dentified specification.	, including the	claims,	as amended b	v anv amend	
referred to above.								-	
I acknowledge the duty to disclos 37, Code of Federal Regulations,		ent & Tradem	ark Office al	l information known to	me to be mate	erial to	patentability a	as defined in	ı Title
I hereby claim foreign priority ber	•	35, United St	ates Code, §	119 of any foreign app	lication(s) for p	patent o	r inventor's ce	rtificate or o	of any
PCT international application(s) d	_								
foreign applications(s) for patent States of America filed by me on t							-		Inited
PRIOR FOREIGN/PCT APPLIC						nen prie	office is claime	u	
COUNTRY (if PCT, indicate PCT)	A	PPLICATION NUMBER		DATE OF FILING			PRIORITY CLAIMED UN	DER 35 USC §119	
The or, made of ory				(usy monal year)			YES		NO
							YES		NO
							YES		NO
I hereby claim the benefit under T	itle 35 United S	tates Code 11	9 S(e) of any	I c States provisi	onal application	n(e) liete	ed helow:		
PRIOR PROVISIONAL APPLIC			•		**				
		D AITT FRIC	TO COM						
PROVISIONAL APP	CICATION NUMBER				FILING DA	VIE.			
I hereby claim the benefit under T	itle 35, United S	tates Code, §1	20 of any pri	or United States applic	cation(s) or PCT	interna	ational applica	ation(s) desig	onatino
the United States of America that prior applications(s) in the manne	is/are listed belo	w and, insofar	as the subject	et matter of each of the	claims of this	applica	tion is not dis	closed in the	at/thos
Office all information known to:	me to be materi	al to patentab:	ility as defin	ed in Title 37, Code	of Federal Reg	ulations	to the U.S. P. §1.56, which	atent & Trac h became av	iemari ailabl
between the filing date of the prior	r application(s) a	ind the nationa	ıl or PCT inte	rnational filing date of	f this application	n:			
PRIOR US APPLICATIONS OF 35USC§120:	R PCT INTERN	IATIONAL A	PPLICATIO	NS DESIGNATING	THE U.S FOR	BENE	FIT UNDER		
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Co	mbined De	claration For Patent Application and	d Power of Attorney (Continued)	ATTORNEY DOCKET					
D	OXXED (	83262N-R							
			ned inventor, I hereby appoin						
	agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute								
	this application and transact all business in the Patent and Trademark Office connected								
th	erewith.								
Se	nd Corresp	ondence to:		Direct Telephone Calls to:					
	Patent Legal Staff			(name and telephone number)					
	Eastman Kodak Company			Norman Darah - f-1					
	343 State Street			Norman Rushefsky					
	Rochester, NY 14650-2201			(716) 588-4529					
		T FAMILY NAME	FIRST GIVEN NAME	FAX: (716) 477-4646					
2	FULL NAME OF INVENTOR	Miller	Rodnev	SECOND GIVEN NAME L.					
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP					
Ĭ		Fairport BUSINESS ADDRESS	New York 14450 USA	USA					
1	BUSINESS ADDRESS	Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA					
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME					
٢		Van Blargan	Jason STATE OR FOREIGN COUNTRY	C.					
0	RESIDENCE & CITIZENSHIP	Rochester	New York 14624 USA	COUNTRY OF CITIZENSHIP USA					
	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)					
49 <u>.</u>		Eastman Kodak Company FAMILY NAME	343 State Street, Rochester	New York 14650 USA					
	FULL NAME OF INVENTOR	Lubecki	Susan	SECOND GIVEN NAME M.					
	RESIDENCE & CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP					
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3	BUSINESS ADDRESS	Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA					
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME					
<u>,</u>		Newkirk	James STATE OR FOREIGN COUNTRY	S. COUNTRY OF CITIZENSHIP					
rð	RESIDENCE & CITIZENSHIP	LeRoy	New York 14482 USA	USA					
	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)					
	FULL NAME OF	Eastman Kodak Company	343 State Street, Rochester	New York 14650 USA					
2	INVENTOR								
Q	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP					
5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)					
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME					
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP					
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)					
I he	ereby declare	that all statements made herein of my ou	vn knowledge are true and that all statements	made on information and belief are believed to be					
true imp	e; and further prisonment, o	r that these statements were made with	the knowledge that willful false statements	and the like so made are punishable by fine or false statements may jeopardize the validity of the					

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
8-27-0 l	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
aug 27 Jos	DATE	DATE